Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
NORTHERN DISTRICT OF GEORGIA (State) Case number (If known):	_ Chapter you are filing under:
Check if this is an amended filing	Chapter 7 Chapter 11 Chapter 12 Chapter 13
29-	E 1505

2022 FEB 26 PN 12: 35

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Ľ	art 1 Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	MARGARET First name	First name
	your driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	CHICK Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name

ebtor 1 MARGARET	CHICK	se number (if known)
First Name Middle N		or name of the same of the sam
o Outsthe lead Adiation		
 Only the last 4 digits of your Social Security number or federal 	xxx - xx - <u>0</u> <u>1</u> <u>6</u> <u>1</u> or	XXX - XX
Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
 Any business names and Employer Identification Numbers (EIN) you have used in 	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN — — — — — — — —	EIN
	EIN	EIN
. Where you live		If Debtor 2 lives at a different address:
	2084 COLD SPRINGS TRAIL SOUTHWEST Number Street	Number Street
	MARIETTA GA 30064 City State ZIP Code	City State ZIP Code
	COBB COUNTY County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code

Debto	or 1 MARGARET First Name Middle Nam	CHICK ne Last Name	Case number (if known)
	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filir I have lived in this district longer other district.	
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
Pa	rt 2: Tell the Court Abo	ut Your Bankruptcy Case	
_	The chapter of the	Charles on Toron brief description	for the control of the state of
	The chapter of the Bankruptcy Code you	for Bankruptcy (Form 2010)). Also, g	f each, see <i>Notice Required by 11 U.S.C.</i> § 342(b) for Individuals Filing o to the top of page 1 and check the appropriate box.
	are choosing to file under	☑ Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		☐ Chapter 13	
8.	How you will pay the fee	local court for more details ab yourself, you may pay with ca	n I file my petition. Please check with the clerk's office in your out how you may pay. Typically, if you are paying the fee sh, cashier's check, or money order. If your attorney is our behalf, your attorney may pay with a credit card or check
			allments. If you choose this option, sign and attach the Pay The Filing Fee in Installments (Official Form 103A).
		By law, a judge may, but is no less than 150% of the official pay the fee in installments). If	ved (You may request this option only if you are filing for Chapter 7. of required to, waive your fee, and may do so only if your income is poverty line that applies to your family size and you are unable to you choose this option, you must fill out the <i>Application to Have the</i> (Official Form 103B) and file it with your petition.
	Have you filed for	☑ No	
	bankruptcy within the last 8 years?	Yes. District	When Case number
		District	When Case number
		District	MM / DD / YYYY
		District	When Case number

Debto	or 1 MARGARET First Name Middle Name		CHICK Last Name	Case number (if known)
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District	Relationship to youWhenCase number, if known
	`			
	Do you rent your residence?		Has your la ☑ No. Go ☐ Yes. Fi part of	andlord obtained an eviction judgment against you? to line 12. Ill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as this bankruptcy petition.
Pa	rt 3: Report About Any I	3usiness	es You Ow	vn as a Sole Proprietor
	Are you a sole proprietor of any full- or part-time		Go to Part 4.	ocation of business
	business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	■ res.	Name of busin	
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		City	State ZIP Code
			Check the a	ppropriate box to describe your business:
				Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single A	sset Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbro	oker (as defined in 11 U.S.C. § 101(53A))
			☐ Commo	dity Broker (as defined in 11 U.S.C. § 101(6))
			☐ None of	the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as	choosin are a sn most red	<i>g to proceed</i> nall business cent balance	r Chapter 11, the court must know whether you are a small business debtor or a debtor under Subchapter V so that it can set appropriate deadlines. If you indicate that you debtor or you are choosing to proceed under Subchapter V, you must attach your sheet, statement of operations, cash-flow statement, and federal income tax return or nents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
	defined by 11 U.S. C. §	☑ No.	I am not filin	ng under Chapter 11.
	1182(1)? For a definition of small business debtor, see	☐ No.	l am filing ui the Bankrup	nder Chapter 11, but I am NOT a small business debtor according to the definition in otcy Code.
	11 U.S.C. § 101(51D).	☐ Yes.		nder Chapter 11, I am a small business debtor according to the definition in the Code, and I do not choose to proceed under Subchapter V of Chapter 11.
		☐ Yes.	l am filing u Bankruptcy	under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Code, and I choose to proceed under Subchapter V of Chapter 11.

Debtor 1	MARGARET First Name	Middle Name	CHICK Last Name		Case numbe	er (if known)	
Part 4:	Report if You	u Own or Have	Any Hazardous Prop	erty or Aı	ny Property That	Needs Immedia	te Attention
	ou own or have						
alleg of im iden publ Or de	erty that poses ed to pose a th minent and ifiable hazard to health or saf o you own any erty that needs	nreat ☐ Yes. to iety?	What is the hazard?				
imm	ediate attention	1?	If immediate attention is	s needed, w	hy is it needed?		
perisi that n	kample, do you ov able goods, or liv aust be fed, or a b eeds urgent repai	estock uilding	Where is the property?				
				Number	Street		
				City		State	ZIP Code

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 Debtor 1
 MARGARET
 CHICK
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	require	d to	receiv	e a	briefing	about
		unselin					

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

J	I am not required to receive a briefing about	t
	credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

ebto		сніск	Case number (if known)
	First Name Middle Name	Last Name		
Pa	art 6: Answer These Ques	stions for Reporting Purposes	·	· · · · · · · · · · · · · · · · · · ·
	What kind of debts do you have?		r consumer debts? Consumer orimarily for a personal, family, or	debts are defined in 11 U.S.C. § 101(8) household purpose."
	you nave:	□ No. Go to line 16b.☑ Yes. Go to line 17.		
			r business debts? Business d stment or through the operation o	ebts are debts that you incurred to obtain f the business or investment.
		□ No. Go to line 16c.□ Yes. Go to line 17.		
		16c. State the type of debts you or	we that are not consumer debts o	or business debts.
	Are you filing under Chapter 7?	☐ No. 1 am not filling under Chap	oter 7. Go to line 18.	
	Do you estimate that after	Yes. I am filing under Chapter	7. Do you estimate that after any	exempt property is excluded and le to distribute to unsecured creditors?
	any exempt property is excluded and	☑ No	are paid that faride will be availab	to distribute to dissection of surface.
	administrative expenses are paid that funds will be	☐ Yes		
	available for distribution to unsecured creditors?	TO YANK OF GAMES AND AND AND A COMMENT AND A		up me ble se vers ver got me des socios victor de Paulemente des constitues de vers de vers de vers de vers de
	How many creditors do	1 -49	1,000-5,000	25,001-50,000
	you estimate that you owe?	☐ 50-99 ☐ 100-199	□ 5,001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000
·		200-999		
19.	How much do you estimate your assets to	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion
	be worth?	\$50,001-\$100,000 \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	☐ \$1,000,000,001-\$10 billion☐ \$10,000,000,001-\$50 billion
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□ \$500,001-\$1 million \	☐ \$100,000,001-\$500 million	☐ More than \$50 billion
	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion
	estimate your liabilities to be?	\$50,001-\$100,000 \$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	□ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion
		□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion
Pa	art 7: Sign Below			
Fo	or you	I have examined this petition, and correct.	I declare under penalty of perjury	that the information provided is true and
				eed, if eligible, under Chapter 7, 11,12, or 13 ler each chapter, and I choose to proceed
		If no attorney represents me and I this document, I have obtained an		eone who is not an attorney to help me fill out U.S.C. § 342(b).
		I request relief in accordance with	the chapter of title 11, United Sta	ates Code, specified in this petition.
			in fines up to \$250,000, or impris	aining money or property by fraud in connection onment for up to 20 years, or both.
		Signature of Debtor 1	Sign Sign	nature of Debtor 2
		42 oct	2527	
		Executed on OF JAY	EXE YY	ecuted on

Debtor 1	MARGARET		сніск	Case number (if known)	
Debior 1	First Name	Middle Name	Last Name		
	and the property		, north is said on the said of		nanana ammatan da kacama
	ir attorney, if inted by one	you are	to proceed under Chapter 7, 11, 12 available under each chapter for whether the state of the sta	ned in this petition, declare that I have inf , or 13 of title 11, United States Code, ar nich the person is eligible. I also certify t 342(b) and, in a case in which § 707(b)(4	nd have explained the relief that I have delivered to the debtor(s)
by an at	re not repres ttorney, you file this page	do not	knowledge after an inquiry that the	information in the schedules filed with th	ne petition is incorrect.
need to	ille tills pag	5.	*	Date	
			Signature of Attorney for Debtor		MM / DD /YYYY
			Printed name		
			Firm name		
			Number Street		
			City	State	ZIP Code
			Contact phone	Email addres	ss
			Bar number	State	_

Debtor 1	MARGARET		СНІСК	Case number (if known)
	First Name	Middle Name	Last Name	
.. 1		t i itan i i		and the state of the
bankr attorn		t an	should understand t themselves success	s an individual, to represent yourself in bankruptcy court, but you that many people find it extremely difficult to represent sfully. Because bankruptcy has long-term financial and legal are strongly urged to hire a qualified attorney.
an atte	are represent orney, you do o file this pag	not	technical, and a mistak dismissed because you hearing, or cooperate v firm if your case is sele	must correctly file and handle your bankruptcy case. The rules are very te or inaction may affect your rights. For example, your case may be u did not file a required document, pay a fee on time, attend a meeting or with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit excted for audit. If that happens, you could lose your right to file another protections, including the benefit of the automatic stay.
			court. Even if you plan in your schedules. If yo property or properly cla also deny you a discha case, such as destroying cases are randomly au	roperty and debts in the schedules that you are required to file with the to pay a particular debt outside of your bankruptcy, you must list that debt ou do not list a debt, the debt may not be discharged. If you do not list aim it as exempt, you may not be able to keep the property. The judge can arge of all your debts if you do something dishonest in your bankruptcy and or hiding property, falsifying records, or lying. Individual bankruptcy dited to determine if debtors have been accurate, truthful, and complete.
			hired an attorney. The successful, you must b Bankruptcy Procedure,	nout an attorney, the court expects you to follow the rules as if you had court will not treat you differently because you are filing for yourself. To be the familiar with the United States Bankruptcy Code, the Federal Rules of and the local rules of the court in which your case is filed. You must also the exemption laws that apply.
		·	Are you aware that filin consequences?	ng for bankruptcy is a serious action with long-term financial and legal
			☐ No ☑ Yes	
			•	nkruptcy fraud is a serious crime and that if your bankruptcy forms are te, you could be fined or imprisoned?
			☐ No ☑ Yes	
			☑ No☑ Yes. Name of Person	o pay someone who is not an attorney to help you fill out your bankruptcy forms?
			Attach Bankrup	tcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
			have read and underst	owledge that I understand the risks involved in filing without an attorney. I ood this notice, and I am aware that filing a bankruptcy case without an e to lose my rights or property if I do not properly handle the case.
			* Max Ck	el *
			Signature of Debtor 1 Date Output Date	Signature of Debtor 2 Date
			MM / DD Contact phone <u>+1678524123</u>	/YYYY / MM / DD /YYYY 27
			Oall atama	Call above

Email address MARGARETCHICK@BELLSOUTH.NET

Email address

	MARGARET		СНІСК		
ebtor 2	First Name	Middle Name	Last Name		
ouse, if fili	ng) First Name	Middle Name	Last Name		
ed State	es Bankruptcy Court for	the: NORTHERN DISTRICT	T OF GEORGIA		
e numbo nown)	er		-		☐ Check if this is ar
					amended filing
	Form 107				
ater	nent of Fir	nancial Affair	s for Indiv	iduals Filing for B	ankruptcy 04/1
s comp	olete and accurate	as possible. If two marri	ed people are filing	g together, both are equally respo	nsible for supplying correct
	ı. If more space is known). Answer ev		te sheet to this for	m. On the top of any additional pa	ages, write your name and case
art 1:	Give Details Ab	out Your Marital Stat	us and Where Y	ou Lived Before	
What is	s your current mari	tal status?			
☐ Mai					
	t married				
	the last 3 years, ha	ave you lived anywhere	other than where y	ou live now?	
☐ No					
☐ No		ave you lived anywhere ones			
☐ No ☑ Yes					Dates Debtor 2 lived there
☐ No ☑ Yes	s. List all of the place		ears. Do not include Dates Debtor 1	where you live now. Debtor 2:	lived there
No Yes	s. List all of the place	es you lived in the last 3 y	ears. Do not include Dates Debtor 1 lived there	where you live now.	lived there
No Yes	s. List all of the place ebtor 1: 2281 AKERS MI		ears. Do not include Dates Debtor 1 lived there From 2018	Debtor 2: Same as Debtor 1	lived there
No Yes	ebtor 1: 2281 AKERS MI	es you lived in the last 3 y	ears. Do not include Dates Debtor 1 lived there	where you live now. Debtor 2:	lived there
No Yes	ebtor 1: 2281 AKERS MI Number Street	es you lived in the last 3 y	ears. Do not include Dates Debtor 1 lived there From 2018	Debtor 2: Same as Debtor 1	lived there Same as Debtor From
No Yes	ebtor 1: 2281 AKERS MI	es you lived in the last 3 y	ears. Do not include Dates Debtor 1 lived there From 2018	Debtor 2: Same as Debtor 1 Number Street	lived there Same as Debtor From
No Yes	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA	es you lived in the last 3 you	ears. Do not include Dates Debtor 1 lived there From 2018	Debtor 2: Same as Debtor 1 Number Street City State	lived there ☐ Same as Debtor From To e ZIP Code
No Ves	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA	es you lived in the last 3 you	ears. Do not include Dates Debtor 1 lived there From 2018 To 2021	Debtor 2: Same as Debtor 1 Number Street	lived there ☐ Same as Debtor From To e ZIP Code ☐ Same as Debtor
No Yes	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA	es you lived in the last 3 you	ears. Do not include Dates Debtor 1 lived there From 2018 To 2021	Debtor 2: Same as Debtor 1 Number Street City State	Ilived there Same as Debtor From To Example ZIP Code Same as Debtor From
No Yes	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA	es you lived in the last 3 you	ears. Do not include Dates Debtor 1 lived there From 2018 To 2021	Debtor 2: Same as Debtor 1 Number Street City Stat	lived there ☐ Same as Debtor From To e ZIP Code ☐ Same as Debtor
No Yes	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA	es you lived in the last 3 you	ears. Do not include Dates Debtor 1 lived there From 2018 To 2021	Debtor 2: Same as Debtor 1 Number Street City Stat	Ilived there Same as Debtor From To e ZIP Code Same as Debtor From
No Po	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA	es you lived in the last 3 you	ears. Do not include Dates Debtor 1 lived there From 2018 To 2021	Debtor 2: Same as Debtor 1 Number Street City Stat	lived there Same as Debtor From To e ZIP Code Same as Debtor From To To
No Yes	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA City	State ZIP Code	ears. Do not include Dates Debtor 1 lived there From 2018 To 2021 From To	Debtor 2: Same as Debtor 1 Number Street City State Number Street City State	Ilived there Same as Debtor From To e ZIP Code To Same as Debtor From To To
No Ves	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA City Jumber Street	GA 30339 State ZIP Code	Pouse or legal equi	Debtor 2: Same as Debtor 1 Number Street City State Number Street City State	Ilived there Same as Debtor From To e ZIP Code Same as Debtor From To ZIP Code
No Ves	ebtor 1: 2281 AKERS MI Number Street APT 4417 ATLANTA City Jumber Street	GA 30339 State ZIP Code	Pouse or legal equi	Pewhere you live now. Debtor 2: Same as Debtor 1 Number Street City State Number Street City State City Sta	Ilived there Same as Debtor From To e ZIP Code Same as Debtor From To ZIP Code

btor 1		ICK	Case nu	mber (if known)	
	First Name Middle Name Las	st Name			
Fill i	you have any income from employme in the total amount of income you receive ou are filing a joint case and you have income. No Yes, Fill in the details.	ed from all jobs and all bus	inesses, including part-ti	me activities.	ndar years?
		Debtor 1	· .	Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
		Operating a business		Operating a business	
	For last calendar year: (January 1 to December 31, 2021	Wages, commissions, bonuses, tips Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before that:	☐ Wages, commissions,		☐ Wages, commissions,	
	(January 1 to December 31, 2020	bonuses, tips Operating a business	\$0.00	bonuses, tips Operating a business	\$
List	nbling and lottery winnings. If you are filir each source and the gross income from No Yes. Fill in the details.				e under Debtor 1.
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until	SOCIAL SECURITY DISABILITY INSURANCE	\$2,754.00		- \$
	the date you filed for bankruptcy:	SNAP	\$178.00		- \$
			\$		- \$
	For last calendar year:	SNAP	\$1,005.00		- \$
	(January 1 to December 31, 2021)	SOCIAL SECURITY DISABILITY INSURANCE	\$14,570.00		- \$
	YYYY		\$		- \$
	Panda salandan 1.5 0.5	SOCIAL SECURITY DISABILITY INSURANCE	14.004.00		•
	For the calendar year before that: (January 1 to December 31 2020)	SNAP	\$ 14,084.00 \$ 980.00		- \$ - \$
	(January 1 to December 31, 2020)	OI WI	\$\$		* \$

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CHICK

Debtor 1	MARGARET	CHICK		Case	number (# known)	
	First Name Middle Name	Last Name		•		
Part 3:	List Certain Payme	nts You Made Befor	re You Filed	for Bankruptcy		
· c Arcolt	har Dabter 1'e er Dabte	u O'o dobte wimevily e	anauman dab	1-0		
	her Debtor 1's or Debto					
□ No	 Neither Debtor 1 nor I "incurred by an individual" 	Debtor 2 has primarily ıal primarily for a persor	r consumer de	e bts. Consumer debts a	re defined in 11 U.S.C. § 10	1(8) as
				ay any creditor a total of	\$6.825* or more?	
		,	,, , , p	_,,	40,020 S. M.S. U.	
	☐ No. Go to line 7.					
	Yes. List below each	h creditor to whom you	paid a total of	\$6,825* or more in one	or more payments and the upport obligations, such as	
	child support	and alimony. Also, do n	ot include payr	nents to an attorney for	this bankruptcy case.	•
	* Subject to adjustment	on 4/01/22 and every	3 years after th	at for cases filed on or a	after the date of adjustment.	
⊿ Ye	s. Debtor 1 or Debtor 2 o	or both have primarily	consumer de	bts.		
	During the 90 days bef	ore you filed for bankru	ptcy, did you pa	ay any creditor a total of	\$600 or more?	
	☑ No. Go to line 7.					
				\$600 or more and the to port obligations, such as	otal amount you paid that	
				ey for this bankruptcy ca		
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name			\$	\$	☐ Mortgage
						☐ Car
	Number Street					Credit card
						Loan repayment
						Suppliers or vendors
	City	State ZIP Code				Other
				\$	\$	☐ Mortgage
	Creditor's Name					☐ Car
						Credit card
	Number Street					Loan repayment
						Suppliers or vendors
						Other
	City	State ZIP Code				— Outlot
				\$	\$	☐ Mortgage
	Creditor's Name					☐ Car
	Niverban Otto					Credit card
	Number Street					Loan repayment
						Suppliers or vendors
						Other
	City	State ZIP Code				

MARGARET

1	MARGARET		сніск			Case number (if known)	
	First Name Middl	e Name	Last Name		-		
<i>side</i> orpor gent,	rs include your relati rations of which you , including one for a as child support and	ves; any gene are an officer, business you	ral partners; re director, perso	elatives of any on in control, or	general partners; p r owner of 20% or	partnerships of whic more of their voting	who was an insider? The you are a general partner; securities; and any managing r domestic support obligations,
	o es. List all payments	to an insider					
_ ,	o. Liot all paymonto	to an inside.		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Ī	nsider's Name				\$	\$	
ī	Number Street						
- 7	Dity	State	ZIP Code	<u></u>			
	ы	State	ZIP Code		\$	_ \$	
Ī	nsider's Name						
<u></u>	Number Street						
7	City	State	ZIP Code				
n ins clud	sider? e payments on debts				payments or trans	fer any property o	n account of a debt that benefited
	s. List all payments	that benefited	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Īi	nsider's Name				\$	\$	
N	lumber Street						
-		· · · · · · · · ·					
c	Dity	State	ZIP Code				
Īr	nsider's Name				\$	\$	
Ī	lumber Street						
-							
ō	City	State	ZIP Code				

ebtor 1			CHICK		Case num	ber (if known)		
	First Name	Middle Name	Last Name					
Part 4:	Identify Leg	al Actions, F	Repossession	s, and Foreclo	sures			
					ny lawsuit, court action,	or adminis	trative proc	edina?
List all	such matters, in							port or custody modification
and co	ontract disputes.							
☑ No)							
☐ Ye	s. Fill in the deta	ils.						
				of the case	Court or agen	ісу		Status of the case
С	ase title				Court Name			Pending
								On appeal
_					Number Street			Concluded
C	aco numbor							
C	ase number				City	State	ZIP Code	
								—— Pending
С	ase title				Court Name			- Pending
_								On appeal
					Number Street			Concluded
С	ase number							<u></u>
					City	State	ZIP Code	
Check I No	all that apply an Go to line 11.	d fill in the deta		any of your prop	erty repossessed, forec	losed, garn	ished, attac	ned, seized, or levied?
Check Mo	all that apply an	d fill in the deta				losed, garn		
Check M No	all that apply an Go to line 11.	d fill in the deta		Describe the p			ished, attac	ned, seized, or levied?
Check M No	all that apply an Go to line 11.	d fill in the deta		Describe the p	roperty			Value of the property
Check Mo	all that apply an Go to line 11.	d fill in the deta		Describe the p	roperty			
Check प No	all that apply and Goto line 11.	d fill in the deta		Describe the p	roperty			Value of the property
Check प No	all that apply and Goto line 11.	d fill in the deta		Describe the p	roperty			Value of the property
Check Mo	all that apply an Go to line 11. S. Fill in the infor	d fill in the deta		Describe the p	roperty appened			Value of the property
Check Mo	all that apply an Go to line 11. S. Fill in the infor	d fill in the deta		Describe the p	roperty appened was repossessed.			Value of the property
Check Mo	all that apply an Go to line 11. S. Fill in the infor	d fill in the deta		Describe the p Explain what h Property Property	appened was repossessed. was foreclosed.			Value of the property
Check Mo	all that apply an Go to line 11. S. Fill in the infor	d fill in the deta	ails below.	Explain what h	roperty appened was repossessed.			Value of the property
Check Mo	call that apply and a control of the	d fill in the deta	ails below.	Explain what h Property Property Property Property Property	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property
Check Mo	call that apply and a control of the	d fill in the deta	ails below.	Explain what h	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le			Value of the property
Check Mo	call that apply and a control of the	d fill in the deta	ails below.	Explain what h Property Property Property Property Property	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property
Check M No	call that apply and control of the c	d fill in the deta	ails below.	Explain what h Property Property Property Property Property	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property
Check Mo	call that apply and a control of the	d fill in the deta	ails below.	Explain what h Property Property Property Property Property	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property
Check Mo	call that apply and control of the c	d fill in the deta	ails below.	Explain what h Property Property Property Property Property	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property
Check Mo	call that apply and a control of the	d fill in the deta	ails below.	Explain what h Property Property Property Property Explain what h	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property
Check Mo	call that apply and a control of the	d fill in the deta	ails below.	Explain what h Property Property Property Property Property Property Explain what h	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property
Check No	call that apply and a control of the	d fill in the deta	ails below.	Explain what h Property Property Property Property Explain what h Property Property Property Property	appened was repossessed. was foreclosed. was garnished. was attached, seized, or le		Date	Value of the property

MARGARET	CHIC	K	Case number (if known)		
First Name Middle Na	ame Last N	Name	Case Hallissi (# Momi)		
/ithin 90 days before you f	filed for bankrup	otcv. did anv creditor. includi	ng a bank or financial institution	on. set off anv an	nounts from vour
ccounts or refuse to make				, a a	yeur
1 No					
Yes. Fill in the details.					
		Describe the action the credit	ar took	Date action	A.m.a.i.mt
				was taken	Amount
Creditor's Name				T !	
					\$
Number Street					
				ļ	
				j	
City	State ZIP Code	Last 4 digits of account num	ber: XXXX		
Vithin 1 year before you file	ed for bankrupte	cy, was any of your property	in the possession of an assigr	nee for the benef	it of
creditors, a court-appointed	d receiver, a cus	stodian, or another official?			
☑ No					
Yes					
t 5: List Certain Gifts	and Contribu	tions			

Gifts with a total value of per person	more than \$600	Describe the gifts		Dates you gave the gifts	Value
par parati				 !	
Person to Whom You Gave the G	ift				\$
					Ф
					Φ
Number Street					
Mulliper Officer			,	!	
City	State ZIP Code			1	
,	2 Zii 0000			1	
Person's relationship to you				:	
				٠	
Gifts with a total value of m per person	ore than \$600	Describe the gifts		Dates you gave the gifts	Value
ter here.				ino Sura	
					\$
Person to Whom You Gave the G	ift				Ψ
				I I	ታ
					\$
Number Street					
City	State ZIP Code				
Person's relationship to you _					

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1	MARGARET	сніск	Cano number (ru		
•	First Name Middle	e Name Last Nan	Case number (# known)_		
		i filed for bankruptc	y, did you give any gifts or contributions with a total valu	e of more than \$6	00 to any charity?
ĺN					
lΥ	es. Fill in the details f	or each gift or contrib	ution.		
	Gifts or contributions to	o charities	Describe what you contributed	Deferen	Value
	that total more than \$60		Describe what you contributed	Date you contributed	value
	•	_		Tf	
CI	narity's Name				\$
	-				
_					\$
Νι	umber Street				
Ci	ty State ZIP	Code	· · · · · · · · · · · · · · · · · · ·	<u>.</u>	
_					
6:	List Certain Lo	osses			
	Describe the property y now the loss occurred	ou lost and	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
			claims on line 33 of Schedule A/B: Property.		
	· · · · · · · · · · · · · · · · · · ·				
İ				<u> </u>	\$
	•				
7:	List Certain Pay	yments or Transfe	ers		
4hi	n 1 year hafara yay	filed for benkrumter	dld you or anyone else acting on your behalf pay or tra		4
			reparing a bankruptcy petition?	ister any property	to anyone
			rers, or credit counseling agencies for services required in ye	our bankruptev.	
			5 5		
N	o es. Fill in the details.				
Υ (es. Fili III INE GETAIIS.				
_			Description and value of any property transferred	Date payment or transfer was	Amount of payment
F	Person Who Was Paid			_ made 	
-					
١	Number Street				\$
•					\$
-	Situ	State ZID Cod-			
(City	State ZIP Code			
-	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				
E	Email or website address				
_	Person Who Made the Paym				

			Case number (if known)_		
	First Name Middle Name Last ∤	Name	, <u>, </u>		
		Description and value of any property t	ransferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid			1	
	Number Street				\$
	Number Street				\$
•					
	City State ZIP Code				
	Email or website address	_			
	Person Who Made the Payment, if Not You				
Z N	lo ′es. Fill in the details.				
		Description and value of any property to	ransferred	Date payment or transfer was	Amount of pay
	Person Who Was Paid			made	
	Number Street	•			\$
					\$
	City State ZIP Code in 2 years before you filed for bankrup	otcy, did you sell, trade, or otherwise	transfer any property	to anyone, other tha	n property
Withing rans notice of the control o	in 2 years before you filed for bankrup sferred in the ordinary course of your l de both outright transfers and transfers n ot include gifts and transfers that you have	business or financial affairs? made as security (such as the granting o	f a security interest or r	nortgage on your pro	perty).
Vithi rans nelucion Oo no M N	in 2 years before you filed for bankrup eferred in the ordinary course of your l de both outright transfers and transfers n ot include gifts and transfers that you have	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or n Describe any property	mortgage on your pro or payments received	perty). Date transi
Within rans not used to the control of the control	in 2 years before you filed for bankrup sferred in the ordinary course of your lide both outright transfers and transfers not include gifts and transfers that you have lo	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or r Describe any property or debts paid in excha	mortgage on your pro or payments received	perty). Date transf
Within rans	in 2 years before you filed for bankrup sferred in the ordinary course of your I de both outright transfers and transfers not include gifts and transfers that you have to you. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or r Describe any property or debts paid in excha	mortgage on your pro or payments received	perty). Date transf
Within rans notice of the control of	in 2 years before you filed for bankrup sferred in the ordinary course of your I de both outright transfers and transfers n ot include gifts and transfers that you hav lo Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or r Describe any property or debts paid in excha	mortgage on your pro or payments received	perty). Date transf
Within rans not under not	in 2 years before you filed for bankrup sferred in the ordinary course of your I de both outright transfers and transfers in ot include gifts and transfers that you hav lo Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or r Describe any property or debts paid in excha	mortgage on your pro or payments received	perty). Date transf
Within rans nelucion nelucion nelucion nelucion nelucion nelucion nelucion nelucion nel controlo	in 2 years before you filed for bankrup sferred in the ordinary course of your I de both outright transfers and transfers in ot include gifts and transfers that you hav lo 'es. Fill in the details. Person Who Received Transfer Number Street City State ZIP, Code Person's relationship to you	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or r Describe any property or debts paid in excha	mortgage on your pro or payments received	perty). Date transf
Within ranselucion nelucion nelucion nelucion nelucion nelucion nelucion nelucion nelucion nello	in 2 years before you filed for bankrup sferred in the ordinary course of your I de both outright transfers and transfers in ot include gifts and transfers that you hav lo Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP, Code Person's relationship to you Person Who Received Transfer	business or financial affairs? made as security (such as the granting o ve already listed on this statement. Description and value of property	f a security interest or r Describe any property or debts paid in excha	mortgage on your pro or payments received	perty). Date transf

		CHICK		Case number (if know	vn)	
18845 44	First Name Middle Name	Last Name	•			
. 1804bl 44						
	O voore before vou file	nd for bankrunte	ov did vou transfor any proport	ty to a colf-cottled true	t or similar dovice of w	hich you
	no years before you file eneficiary? (These are o		cy, did you transfer any propert et-protection devices.)	y to a sen-settled trus	t or similar device of w	men you
	monorary ((mood are s	511511 Game 2 Good				
☑ No	min in the details					
☐ Yes.	. Fill in the details.					
			Description and value of the prope	rty transferred		Date transfer
		l				was made
Name	e of trust					
						,
-				·	. ,,	
art 8: Li	ist Certain Financi:	al Accounts,	Instruments, Safe Deposit	Boxes, and Storage	e Units	
n Within 1	1 year before you filed	for bankruptcy	, were any financial accounts o	r instruments held in	your name or for your	henefit
	sold, moved, or transf		were any mancial accounts o	i ilistraments nera in s	your name, or for your	Dellelli,
			other financial accounts; certi	ficates of deposit; sha	res in banks, credit un	ions,
brokera	ige houses, pension fu	unds, cooperativ	ves, associations, and other fir	ancial institutions.		
No						
Yes.	. Fill in the details.					
			Last 4 digits of account number	Type of account or	Date account was	Last balance befor
			-	instrument	closed, sold, moved, or transferred	closing or transfer
					or transferred	
Nam	ne of Financial Institution		XXXX	☐ Checking		\$
				☐ Savings		Ψ
Num	mber Street			☐ Money market		
_						
<u> </u>	v State	ZIP Code		☐ Brokerage		
City	, State	ZIP Code		☐ Other		
				_		
	me of Financial Institution		XXXX-	☐ Checking		^
Nam						\$
Nam	ne of the manetal modification			Savings		\$
	mber Street					\$
				Savings		\$
				☐ Savings ☐ Money market		\$

	MARGARET First Name	Middle Name	CHI Last	Name	_	Case number (if known)	
□ N	0		storage unit	or place other than yo	our home within 1	year before you filed for bankrupt	cy?
2 Y	es. Fill in the de	tails.		Who else has or had	access to it?	Describe the contents	Do you sti have it?
	PUBLIC STO			Name	- <u></u>	CLOTHES	□ No ☑ Yes
	1720 SOUTH		DRIVE				Yes Yes
	Number Street			Number Street			İ
	MARIETTA city	GA State	30060 ZIP Code	City State ZIP Code			
or ho	ou hold or control	rol any pro omeone.		or Control for Some		ty you borrowed from, are storing	for,
_ `				Where is the property	?	Describe the property	Value
	Owner's Name						\$
	Number Street	<u></u>		Number Street			
							1
							and the second s
	City	State	ZIP Code	City	State ZIP Code		
rt 10	Give Deta	ails Abou	ut Environ	mental Information			
r the Envil haza inclu Site utiliz Haza subs	purpose of Part fronmental law in ardous or toxic s uding statutes on means any local ze it or used to of ardous material stance, hazardou all notices, relea	alls About 10, the formeans any substance regulation facilition, facilition, operations any us material ases, and passes, and passes, and passes, and passes and pass	ut Environr llowing define federal, stands, wastes, on the federal fed	mental Information nitions apply: te, or local statute or a r material into the air, ng the cleanup of thes rty as defined under a e it, including disposal avironmental law defin contaminant, or simil-	regulation concern land, soil, surface se substances, wa ny environmental I sites. nes as a hazardous ar term.	law, whether you now own, opera	dium, te, or tic
r the Envi. haza inclu Site utiliz Haza subs	purpose of Partironmental law in ardous or toxic suding statutes of means any localize it or used to of ardous material istance, hazardouall notices, releasing government	10, the formeans any substance regulation, facilition, operameans any us material ases, and particular unit not	ut Environr llowing define federal, stands, wastes, on the federal fed	mental Information nitions apply: te, or local statute or a r material into the air, ng the cleanup of thes rty as defined under a e it, including disposal avironmental law defin contaminant, or simil-	regulation concern land, soil, surface se substances, wa ny environmental I sites. nes as a hazardous ar term.	water, groundwater, or other med stes, or material. law, whether you now own, opera s waste, hazardous substance, too en they occurred.	dium, te, or tic
r the Envi. haza inclu Site utiliz Haza subs	purpose of Part fronmental law in ardous or toxic suding statutes on means any local relation of the property of the property of the property of the property of the purpose of the purpos	10, the formeans any substance regulation, facilition, operameans any us material ases, and particular unit not	ut Environr llowing define federal, stands, wastes, on the federal fed	mental Information nitions apply: te, or local statute or a r material into the air, ng the cleanup of thes rty as defined under a e it, including disposal avironmental law defin contaminant, or simil-	regulation concert land, soil, surface se substances, wa ny environmental I sites. nes as a hazardous ar term. , regardless of wh r potentially liable	water, groundwater, or other med stes, or material. law, whether you now own, opera s waste, hazardous substance, too en they occurred.	dium, te, or tic
r the Envi haza inclu Site utiliz Haza subs	purpose of Part fronmental law in ardous or toxic suding statutes on means any local relation of the property of the property of the property of the property of the purpose of the purpos	10, the formeans any substance regulation, facilition, operameans any us material ases, and particular unit not	ut Environr llowing define federal, stands, wastes, on the federal fed	mental Information nitions apply: te, or local statute or a r material into the air, ng the cleanup of thes rty as defined under a e it, including disposal avironmental law defin contaminant, or simil- is that you know about, at you may be liable or	regulation concert land, soil, surface se substances, wa ny environmental I sites. nes as a hazardous ar term. , regardless of wh r potentially liable	water, groundwater, or other med stes, or material. law, whether you now own, opera s waste, hazardous substance, too en they occurred. under or in violation of an environ	dium, te, or tic nmental law?
r the Envi haza inclu Site utiliz Haza subs	purpose of Part fronmental law in ardous or toxic suding statutes or means any local receit or used to our ardous material istance, hazardou all notices, releasing government No	10, the formeans any substance regulation, facilition, operameans any us material ases, and particular unit not	ut Environr llowing define federal, stands, wastes, on the federal fed	mental Information nitions apply: te, or local statute or i r material into the air, ng the cleanup of thes rty as defined under a e it, including disposal rvironmental law defin contaminant, or simil s that you know about at you may be liable of	regulation concert land, soil, surface se substances, wa ny environmental I sites. nes as a hazardous ar term. , regardless of wh r potentially liable	water, groundwater, or other med stes, or material. law, whether you now own, opera s waste, hazardous substance, too en they occurred. under or in violation of an environ	dium, te, or tic nmental law?

ZIP Code

State

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tor 1	MARGARET	CHICK	Case number (if known)	
01 1	First Name Middle Name	Last Name	Case Humber (ii Midwir)	
lave	you notified any government	al unit of any release of hazardous r	naterial?	
9 1	No			
	res. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
	Name of site			
	Name of site	Governmental unit		
	Number Street	Number Street		
		City State ZIP C	ode	
	City State ZIF	P Code		
lave	you been a party in any judic	ial or administrative proceeding und	der any environmental law? Include settlement	s and orders.
L	res. Fill in the details.			.
		Court or agency	Nature of the case	Status of the case
(Case title			_
		Court Name		Pending
_				On appea
		Number Street		Conclude
7	Case number			
	And Halling.	City State	ZIP Code	
rt 1	Cive Details About V	our Business or Connections to	Amy Dunings	
				
_			s or have any of the following connections to a her activity, either full-time or part-time	any business?
_	_	lity company (LLC) or limited liabilit		
	A partner in a partnership	, , , , , , , , , , , , , , , , , , ,	, , ,	
[🖬 An officer, director, or man	aging executive of a corporation		
Į	An owner of at least 5% of	the voting or equity securities of a c	orporation	
	No. None of the above applies.			
	• •	e and fill in the details below for eac	h business.	
		Describe the nature of the b	usiness Employer Identification	number
	Business Name		Do not include Social S	Security number or ITIN.
			EIN:	
	Number Street			
		Name of accountant or bool	kkeeper Dates business existed	1
			From To	
	City State ZII	P Code	FIGHT TO	
	, Oldio Ell	Describe the nature of the b	pusiness Employer Identification	number
	Business Name		· -	Security number or ITIN.
	· · · · · · · · · · · · · · · · · · ·		EIAI.	
	Number Street		EIN:	
		Name of accountant or book	kkeeper Dates business existed	I
			From To	
	014.	D. O. de	I I	

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Petition Page 21 of 63 CHICK MARGARET Debtor 1 Case number (if known) First Name Middle Name Last Name Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Dates business existed Name of accountant or bookkeeper From _____ To ____ ZIP Code City State 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Signature of Debtor 1 Date _ Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

☑ No

Yes. Name of person_

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		Petition Page 22 of 63		
Fill in this i	nformation to identify your case and this	s filing:		
		2.1121		
Debtor 1	MARGARET First Name Middle Name	CHICK Last Name		
Debtor 2	A Flat Name	Lankley		
(Spouse, if filing	NORTHERN DISTRI	Last Name		
United States	Bankruptcy Court for the:	of of Georgia		
Case number	· _ 		· · · · · · · · · · · · · · · · · · ·	Check if this is an
 				amended filing
0.66	1			J
Officia	I Form 106A/B			
Sche	edule A/B: Propert	V		12/15
	 	s. List an asset only once. If an asset fits in more	then one optomore list	the popular the
category w responsibl write your	there you think it fits best. Be as comple for supplying correct information. If manner and case number (if known). Answer	ete and accurate as possible. If two married peoplo ore space is needed, attach a separate sheet to th	e are filing together, bor is form. On the top of a	th are equally
1 Do you c	own or have any legal or equitable inters	st in any residence, building, land, or similar prop	erty?	
	So to Part 2.	or in any restauries, banang, tana, or on the prop	,.	
	Where is the property?			
		What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
1.1.		☐ Single-family home	the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
	Street address, if available, or other description	 Upplex or multi-unit building Condominium or cooperative 	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
_		- 🔲 Land	\$	\$
		Investment property	Describe the nature of	of your ownership
Ci	ty State ZIP Code	-	interest (such as fee	simple, tenancy by
		Who has an interest in the property? Check one.	the entireties, or a life	e estate), if known.
		Debtor 1 only		
7	ounty	Debtor 2 only		
	Suffic	Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		lacksquare At least one of the debtors and another	(see instructions)	•
		Other information you wish to add about this it property identification number:		
lf vou ov	vn or have more than one, list here:	property rechanged maniper.		
,		What is the property? Check all that apply.	Do not deduct secured cia	aims or exemptions. Put
		☐ Single-family home	the amount of any secure	d claims on Schedule D:
1.2. Si	reet address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	тіѕ Ѕесигеа ву Ргорепу.
		☐ Condominium or cooperative☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	entile property:	e
		☐ Investment property	Ψ	Ψ
C	ity State ZIP Code	☐ Timeshare	Describe the nature of interest (such as fee	
	, Sate 211 Sode	Other	the entireties, or a life	
		Who has an interest in the property? Check one.		
		Debtor 1 only		
c	ounty	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	D objects server	
		☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
			,	

Other information you wish to add about this item, such as local property identification number:

Debtor 1	MARGARE 22-51585-IrC CHICK First Name Middle Name Last Name	1 Filed 02/28/22 Entered 02/28 Petition Page 23 of 63se number (##	/22 12:36:23 D	esc
1.3.	Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property? Describe the nature of interest (such as fee of the entireties, or a life	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by
	County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number:	Check if this is co (see instructions) m, such as local	
2. Add t you h	he dollar value of the portion you own for a nave attached for Part 1. Write that number	ll of your entries from Part 1, including any entries	s for pages →	\$0.00
you own 3. Cars,	that someone else drives. If you lease a vehic vans, trucks, tractors, sport utility vehicles	st in any vehicles, whether they are registered or a le, also report it on Schedule G: Executory Contracts a s, motorcycles		
3.1.	Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the entire property?	l claims on Schedule D:
If you	Make: Model: Year: Approximate mileage:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property?	l claims on Schedule D:
	Other information:	☐ Check if this is community property (see instructions)	\$	\$

Debtor 1

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3.3.				
0.0.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
	Year:	Debtor 2 only	Current value of the	
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Other mormation.	☐ Check if this is community property (see	\$	\$
		instructions)		
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
0.4.	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Clain	
	Year:	Debtor 2 only		• • •
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	•	At least one of the debtors and another		
	Other information:	☐ Check if this is community property (see	\$	\$
		instructions)		
4.1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
4.1.	Make:	Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
4.1.		Debtor 1 only Debtor 2 only	the amount of any secured Creditors Who Have Clain	d claims on Śchedule D: ns Secured by Property.
4.1.	Model:	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
4.1.	Model:	Debtor 1 only Debtor 2 only	the amount of any secured Creditors Who Have Clain	d claims on Śchedule D: ns Secured by Property.
4.1.	Model:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
4.1.	Model:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
	Model:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see	the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
łf yo	Model: Year: Other information: u own or have more than one, list here:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
	Model: Year: Other information: u own or have more than one, list here: Make:	 □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only 	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
łf yo	Model: Year: Other information: u own or have more than one, list here: Make:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
łf yo	Model: Year: Other information: u own or have more than one, list here: Make: Model: Year:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
łf yo	Model: Year: Other information: u own or have more than one, list here: Make: Model:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
łf yo	Model: Year: Other information: u own or have more than one, list here: Make: Model: Year:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
łf yo	Model: Year: Other information: u own or have more than one, list here: Make: Model: Year:	 □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
łf yo	Model: Year: Other information: u own or have more than one, list here: Make: Model: Year:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
If yo 4.2.	Model: Year: Other information: u own or have more than one, list here: Make: Model: Year: Other information:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ sims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?

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art 3: Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	☑ No ☐ Yes. Describe	\$0.00
_		
7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No □ Yes. Describe COMPUTER, TV, CELLPHONE	\$550.00
8.	Collectibles of value	-
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No □ Yes. Describe	\$
9.	Equipment for sports and hobbies	
·.	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	₩ No	 _
	Yes. Describe	\$0.00
10	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
	Yes. Describe	\$
11	. Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
	Yes, Describe CLOTHES	\$\$
12	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	✓ No Yes. Describe	\$0.00
13	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	☑ No	
	Yes. Describe	\$\$
14	Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	
	Yes. Give specific information	\$\$
15	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$ 750.00

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Part 4:	Describe	Your	Financial	Asset

Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes	e of the own? secured claims
17. Deposits of money	
Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes	120.00
Institution name: 17.1. Checking account: WELLS FARGO, \$	
17.2. Checking account: 17.3. Savings account: WELLS FARGO, \$ 17.4. Savings account: \$ 17.5. Certificates of deposit: \$ 17.6. Other financial account: \$ 17.7. Other financial account: \$ 17.8. Other financial account: \$ 17.9. Other financial account: \$ 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No	
17.3. Savings account: WELLS FARGO, \$ 17.4. Savings account: \$ 17.5. Certificates of deposit: \$ 17.6. Other financial account: \$ 17.7. Other financial account: \$ 17.8. Other financial account: \$ 17.9. Ot	150.00
17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: \$	
17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: \$ 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes	50.00
17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: \$ 17.9. Other financial account: \$ 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes	
17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: \$ 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes	
17.8, Other financial account: 17.9, Other financial account: \$	
17.9. Other financial account: \$	
18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes	
Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes	
Yes	
\$	
<u> </u>	
\$	
	
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture	
☑ No Name of entity: % of ownership:	
Yes. Give specific% \$	
% \$	

20.	Government and corpo	orate bonds and other	er negotiable and non-negotiable instruments	
	Negotiable instruments i	nclude personal chec	cks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.	
	☑ No			
	Yes. Give specific	Issuer name:		
	information about			Q
	them		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Ψ
				\$
				\$
21.	Retirement or pension		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	No No	M, ENIOM, Neogii, 40	orky, 400(b), titlit savings accounts, or other pension or profit-sharing plans	
	Yes. List each			
	account separately.	Type of account:	Institution name:	
				œ
	e .	401(k) or similar plan:		Φ
		Pension plan:		\$
		IRA:		\$
		Retirement account:		\$
				•
		Keogh:		\$
		Additional account:		\$
		Additional account:		\$
	Examples: Agreements companies, or others		nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	
	No No			
	☐ Yes	Ins	stitution name or individual:	
		Electric:		\$
		Gas:		¢
		Heating oil:		Ψ
		-	ntal unit:	\$
			rea unt.	\$
		Prepaid rent:		\$
		Telephone:		\$
		Water:		\$
		Rented furniture:		\$
		Other:		\$
23	Annuities (A contract fo	r a periodic payment i	of money to you, either for life or for a number of years)	
	No No	postodio paystiotti	a	
		lancar and the second		
	Yes	Issuer name and des		•
				\$
				\$ ¢
				Ψ

Debtor 1	MARGAREE 22-51 First Name Middle N		Last Name	Filed 02 Petition	/28/22 Page 2	Entered 02/2 28 of 63	28/22 12:36:23	Desc	
	s in an education IRA			alified ABLE p	rogram, or	under a qualified st	ate tuition program.		
	C. §§ 530(b)(1), 529A(l	b), and 529(t)(1).						
☑ No									
u res		Institution n	ame and de	scription. Sepa	rately file th	e records of any inter	ests.11 U.S.C. § 521(c)		
								\$	
								\$	
								\$	
	equitable or future in able for your benefit	terests in pı	operty (oth	er than anythi	ng listed in	line 1), and rights o	or powers		
☑ No									
	Give specific								0.00
infor	mation about them	·						\$	0.00
6 Patents	, copyrights, tradema	arks trades	ecrets, and	other intellect	tual proper	tv			
	es: Internet domain na								
No									
	Give specific mation about them							\$	0.00
			~ ~ 					1	
	es, franchises, and ot es: Building permits, ex				n holdings,	liquor licenses, profe	ssional licenses		
No	_								
	Give specific mation about them							\$	0.00
	Ĺ							I	
Money or p	property owed to you	?						Current value of portion you own Do not deduct secur claims or exemption	? red
. .								oldimo or oxompaon	
28. Tax retu 28. No	ınds owed to you								
	. Give specific informat	tion					Ì	_	
— 163.	about them, including	whether					Federal:	\$	
	you already filed the rand the tax years						State:	\$	
	and the tax years						Local:	\$	
29. Family Example No		um alimony,	spousal sup	port, child supp	oort, mainte	nance, divorce settler	nent, property settlemer	nt	
	. Give specific informa	tion							
— 165.	. Give specific informa	110F1					Alimony:	\$	
							Maintenance:	\$	
							Support:	\$	
							Divorce settlement:	\$	
						·····	Property settlement:	\$	
	mounts someone ow es: Unpaid wages, dis Social Security bei	ability insura	nce paymen I loans you r	ts, disability be nade to someo	nefits, sick ne else	pay, vacation pay, w	orkers' compensation,		
No	-		-						
🛚 Yes	. Give specific informa	tion							0.00
] *	

Debtor 1

Debtor 1 MARGARGE 22-51585-III First Name Middle Name	C CHICOC 1 Filed 02/2	8/22 Entered 02/28/22 12: Page 29 of 63	36:23 Desc
		ange 20 or oc	
 Interests in insurance policies Examples: Health, disability, or life insur No 	ance;health savings account (HS.	A);credit, homeowner's, or renter's insuranc	e
Yes. Name the insurance company of each policy and list its value.	Company name:	Beneficiary:	Surrender or refund value:
			\$
			\$
 Any interest in property that is due you are the beneficiary of a living trust property because someone has died. No 		rance policy, or are currently entitled to rece	pive
Yes. Give specific information			\$0.00
 Claims against third parties, whether Examples: Accidents, employment disputed No 			
Yes. Describe each claim			\$ 0.00
 Other contingent and unliquidated cla to set off claims No 	aims of every nature, including	counterclaims of the debtor and rights	
Yes. Describe each claim			\$0.00
5. Any financial assets you did not alrea	dy list		
✓ No ✓ Yes, Give specific information			\$\$
6. Add the dollar value of all of your ent for Part 4. Write that number here			\$ 320.00
Part 5: Describe Any Busines	s-Related Property You (Own or Have an Interest In. List	any real estate in Part 1.
B7. Do you own or have any legal or equi ■ No. Go to Part 6. ■ Yes. Go to line 38.	table interest in any business-r	elated property?	
res. Go to line 38.			Current value of the
			portion you own?Do not deduct secured claims or exemptions.
8. Accounts receivable or commissions	you already earned		
No Yes. Describe			
- 163. Describe			\$
 Office equipment, furnishings, and set Examples: Business-related computers, softwice No 		achines, rugs, telephones, desks, chairs, electroni	c devices

Tyes. Describe.....

Debtor 1	MARGARE 2	22-5158 Middle Name		Last Name	Filed Petition	02/28/22 1 Page	Entere 30 of 63 st	d 02/28/2 e number (if know.	2 12:36	:23 D	esc	
40. Machin	ery, fixtures, e	quipment,	supplies	you use it	n business,	and tools of	your trade					
☐ No	٦									 -		
∟ Yes	. Describe									\$		<u> </u>
41. Invento No	ry											
☐ Yes	. Describe									\$		
42. Interest	s in partnersh	ips or join	t venture	s								
	. Describe	Name of e	entity:					%	of ownershi	p:		
									%	\$		_
									%	\$		<u> </u>
									%	\$		_
☐ No☐ Yes	ner lists, mailin Do your lists No Yes, Desc	include po	ersonally	identifiabl		on (as define	d in 11 U.S.C.	§ 101(41A))?		\$		
☐ No ☐ Yes	siness-related Give specific rmation	property y	ou did n	ot already	list					\$		
										\$_		-
										\$		_
										\$		_
										\$		_
	e dollar value o									*_ *_ *_		0
Part 6: 46. Do you ☑ No.	ľ	ny Farm- r have an i	and Co	mmercial n farmland	Fishing-R , list it in Pa	Related Pro	perty You O	wn or Have	an Intere	St In. Cur port	rent value of the ion you own? ot deduct secured claim.	s
47. Farm a	nimals									or ex	emptions.	

Official Form 106A/B

☐ Yes.....

☐ No

Examples: Livestock, poultry, farm-raised fish

Debtor 1 MARGARES 2	2-51585-IrC	Filed 02/28/22 Petition Page 3	Entered 02/28 1 of 63	3/22 12:36:23	Desc	
48. Crops—either growing	g or harvested					
☐ No ☐ Yes, Give specific information					\$	
49. Farm and fishing equi	pment, implements, machinery	, fixtures, and tools of t	rade		1	
					\$	
☐ No	olies, chemicals, and feed					
☐ Yes					\$	
51. Any farm- and comme	ercial fishing-related property y	ou did not already list			, , , , , , , , , , , , , , , , , , , ,	
Yes. Give specific information					\$	
	of all of your entries from Part 6				\$	0.00
	All Property You Own or operty of any kind you did not a country club membership PUBLIC STORAGE, STORA	llready list?			\$ \$ \$	
54. Add the dollar value of	of all of your entries from Part 7	. Write that number her	e	-	\$ <u>(</u>	0.00
Part 8: List the T	otals of Each Part of this	s Form				
55. Part 1: Total real esta	te, line 2			>	\$	<u> </u>
56. Part 2: Total vehicles,	line 5	\$	0.00			
57. Part 3: Total personal	and household items, line 15	\$	750.00			
58. Part 4: Total financial	assets, line 36	\$	320.00			
59. Part 5: Total business	-related property, line 45	\$	0			
60. Part 6: Total farm- and	d fishing-related property, line	52 \$	0.00			
61. Part 7: Total other pro	operty not listed, line 54	+ \$	0.00			
62. Total personal proper	ty. Add lines 56 through 61	\$1	Copy person	onal property total 👈	+\$ 1,070	0.00
63. Total of all property o	on Schedule A/B. Add line 55 + li	ne 62			\$1,070	.00

Filed 02/28/22 Entered 02/28/22 12:36:23 Case 22-51585-lrc Doc 1 Fill in this information to identify your case: MARGARET CHICK Debtor 1 Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Ga, Code Ann. § 44-13-100 (a)(4) Brief ELECTRONICS, COMPUTER 250.00 **☑** \$ 250.00 description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Ga. Code Ann. § 44-13-100 (a)(4) Brief ELECTRONICS, TV 200.00 **2** \$_ 200.00 description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Ga. Code Ann. § 44-13-100 (a)(4) Brief ELECTRONICS, CELLPHONE **2** \$ description: ☐ 100% of fair market value, up to Line from

Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment	nt.)
---	------

2 N

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

LI No

Yes

Schedule A/B: 7

any applicable statutory limit

Case 22-51585-lrc Doc 1 Filed 02/28/22 Entered 02/28/22 12:36:23 Desc

MARGARET

Debtor 1

First Name Middle Name

Additional Page

		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	CLOTHES 11	\$	200.00 200.00 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100 (a)(4)
Brief description: Line from Schedule A/B:	<u>CASH</u>	\$120.0	\$ 120.00 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100 (a)(6)
Brief description: Line from Schedule A/B:	CHECKING ACCOUNT, WELLS FARGO	. \$150.c	150.00 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100 (a)(6)
Brief description: Line from Schedule A/B: Brief	SAVINGS ACCOUNT, WELLS FARGO	\$50.	100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100 (a)(6)
description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	100% of fair market value, up to any applicable statutory limit	

Case 22-51585-lrc Doc 1 Filed 02/28/22 Entered 02/28/22 12:36:23 Desc

Petition Page 34 of 63

Fill in this information to identify your case:

Debtor 1 MARGARET CHICK
First Name Middle Name Last Name

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA

Case number (If known)

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

for each claim. If more than one creditor I	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column Coursecure portion
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		7		
Number Street	-			
	As of the date you file, the claim is: Check all that apply.	_		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
2	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		7		
Number Street	-			
	As of the date you file, the claim is: Check all that apply.	J		
	Contingent			
	☐ Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	-		
community debt				

Case 22-51585-lrc De	oc 1 Filed 02/28/22		22 12:36:23	Desc	
in this information to identify your case:	Petition Page 3	5 of 63			
tor 1 MARGARET	СНІСК				
	Last Name				
use, if filing) First Name Middle Name	Last Name				
ed States Bankruptcy Court for the: NORTHERN DIS	TRICT OF GEORGIA				
e number					if this is an
nown)				antend	ieu illing
icial Form 106E/F	e e				
	Nho Have Unse	cured Claim	S		12/15
				MODIODITY	
ed, copy the Part you need, fill it out, numbe	r the entries in the boxes on the				
idditional pages, write your name and case r	umber (if known).				
1: List All of Your PRIORITY Unsecu	red Claims				
o any creditors have priority unsecured clai	ns against you?				
No. Go to Part 2.					
	ana dikan kan mana dia an ana mai ante			alv. 6 a ala . a	Jaine Fou
ach claim listed, identify what type of claim it is.	If a claim has both priority and no	priority amounts, list that	t claim here and s	show both pri	ority and
-		·	not the other crea	illoro irri dice	J.
		·		-	Nonpriority
				amount	amount
	1 (4 1) . (6				_
Disable Conditions Name	Last 4 digits of account number	er 3	\$ \$.		\$
Priority Creditor's Name	When was the debt incurred?		\$ \$_	· · · · · · · · · · · · · · · · · · ·	\$
Priority Creditor's Name Number Street	_		\$\$		\$
	When was the debt incurred? As of the date you file, the cla		ō \$_		\$
	When was the debt incurred? As of the date you file, the cla		\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated		\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed	im is: Check all that apply.	\$\$.		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure	im is: Check all that apply.	\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations	im is: Check all that apply.	\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure	im is: Check all that apply and claim:	\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal intoxicated	ed claim: s you owe the government injury while you were	\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal	ed claim: s you owe the government injury while you were	\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal intoxicated Other. Specify	im is: Check all that apply. In im is: Check all that apply. In im is: Check all that apply. In im is: Check all that apply. In im is: Check all that apply. In im is: Check all that apply. In im is: Check all that apply.			
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debted intoxicated Other. Specify Last 4 digits of account number	ed claim: s you owe the government injury while you were			\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name	When was the debt incurred? As of the date you file, the cla Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal intoxicated Other. Specify	ed claim: s you owe the government injury while you were	\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name	When was the debt incurred? As of the date you file, the classical Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal intoxicated Other. Specify Last 4 digits of account number was the debt incurred? As of the date you file, the classical continuous care and certain other debt.	ed claim: s you owe the government injury while you were	\$\$		s section and the contract of
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name Number Street	When was the debt incurred? As of the date you file, the classical Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal intoxicated Other. Specify Last 4 digits of account number when was the debt incurred? As of the date you file, the classical Contingent	ed claim: s you owe the government injury while you were	\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code	When was the debt incurred? As of the date you file, the classical Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal intoxicated Other. Specify Last 4 digits of account number was the debt incurred? As of the date you file, the classical continuous care and certain other debt.	ed claim: s you owe the government injury while you were	\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name Number Street	When was the debt incurred? As of the date you file, the classical Contingent Unliquidated Disputed Type of PRIORITY unsecure Domestic support obligations Taxes and certain other debt Claims for death or personal intoxicated Other. Specify Last 4 digits of account number when was the debt incurred? As of the date you file, the classical Contingent Unliquidated Disputed	ed claim: s you owe the government injury while you were	\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the classes of the date you file, the classes of the date of the classes of the date of the date of the date of the classes of the classes of the c	im is: Check all that apply. ed claim: s you owe the government injury while you were eer	Security and the securi		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred? As of the date you file, the classes of the d	ed claim:			\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the classes of the date you file, the classes of the date of the classes of the date of the date of the date of the classes of the classes of the c	ed claim: syou owe the government injury while you were aim is: Check all that apply.	\$\$		\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	When was the debt incurred? As of the date you file, the classes of the d	ed claim: sim is: Check all that apply. do claim: syou owe the government injury while you were doing: set claim: syou owe the government injury while you were			\$
Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the classes of the d	ed claim: sim is: Check all that apply. do claim: syou owe the government injury while you were doing: set claim: syou owe the government injury while you were	\$\$		\$
	tor 1 First Name Middle Name	tor 1 First Name Middle Name Last Name	tor 1 MARGARET CHICK First Name Middle Name Last Name tor 2 use, if filling) First Name Northern DISTRICT OF GEORGIA et author of the enumber et of States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA et number complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for complete and accurate as possible, listed in Schedule D: Creditors Who Have Claims. Also list Property (Official Form 106A/B) and on Schedule D: Creditors Who Have Claims Secure ed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuity and the part of the complete	MARGARET First Name Middle Name Last Name Middle Name Last Name and States Bankruptcy Court for the: MORTHERN DISTRICT OF GEORGIA e number nown) Icial Form 106E/F hedule E/F: Creditors Who Have Unsecured Claims c complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NC he other party to any executory contracts or unexpired leases that could result in a claim. Also list executory control or the property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule D: Creditors Who Have Claims Secured by Property. If ed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to the diditional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims of any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Ist all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separate ach claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and sonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more record to the continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditor and explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim	MARGARET CHICK FIRE Name Middle Name Last Name ded States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA enumber enumber cover) Cicial Form 106E/F hedule E/F: Creditors Who Have Unsecured Claims complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY he other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not in tors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space ed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims o any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Ist all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each cach claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two nesecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part for an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

MARGANISE 22-51585-Irc CHICKOC 1 Filed 02/28/22 Entered 02/28/22 12:36:23 Desc

	First Mante Middle Mante	Lastivatile	Pellilon	Page 36 01 63			
Pa	rt 2: List All of Your NONPRIOR	ITY Uns	ecured Claims				
3.	Do any creditors have nonpriority uns	ecured cl	aims against you	1?			
	No. You have nothing to report in this						
	☑ Yes						
4.	List all of your nonpriority unsecured of	claims in	the alphabetical	order of the creditor who holds e	ach claim. If a creditor has	more	than one
	nonpriority unsecured claim, list the credi included in Part 1. If more than one credit						
	claims fill out the Continuation Page of Page		a particular classis,	not the enter erealiste in Fair ent ent			.,
						Tot	al claim
1.1	AVANT				0550		
	Nonpriority Creditor's Name			Last 4 digits of account number		\$	7,000.00
	222 NORTH LASALLE STREET			When was the debt incurred?	12/24/19		
	Number Street			•			
	CHICAGO City	IL State	60601 ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	Sily	_,,,,,,	21, 3013	☐ Contingent	,.,		
	Who incurred the debt? Check one.			Unliquidated			
	☑ Debtor 1 only			☐ Disputed			
	Debtor 2 only			'			
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:		
	At least one of the debtors and another			Student loans			
	Check if this claim is for a communi	ity debt		Obligations arising out of a sepa			
	Is the claim subject to offset?			that you did not report as priority Debts to pension or profit-sharing			
	☑ No			☑ Other. Specify COLLECTI	ONS		
	☐ Yes						
1.2	CAP1/WMT	en de la companyación de la comp	o maganisana arang arang salah salah salah magani berakan dari dari	Last 4 digits of account number	9296	\$	561.00
	Nonpriority Creditor's Name			When was the debt incurred?	1/24/19		
	PO BOX 31293						
	Number Street			- 			
	SALT LAKE CITY	UT	84131	As of the date you file, the claim	is: Check all that apply.		
	City	State	ZIP Code	Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed			
	Debtor 1 only			Disputed			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecu	ıred claim:		
				Student loans			
				Obligations arising out of a sepa	ration agreement or divorce		
	☐ Check if this claim is for a community debt		that you did not report as priority Debts to pension or profit-sharin				
	Is the claim subject to offset?		Other, Specify CREDIT CA				
	☑ No ☑ Yes						
4.3							
	Nonpriority Creditor's Name			_ Last 4 digits of account number	0063	\$	602.00
	121 S 13TH ST			When was the debt incurred?	8/23/1/		
	Number Street			-			
	LINCOLN	NE	68508	- As of the date you file, the claim	is: Check all that apply.		
	City	State	ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only			Disputed			
	Debtor 2 only			•			
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsect	ured claim:		
				Student loans			
	☐ Check if this claim is for a commun	ity debt		Obligations arising out of a sepa that you did not report as priority			
	Is the claim subject to offset?			Debts to pension or profit-sharin		;	
	₩ No			Other. Specify	= :		
	Yes						

 MARGERSE 22-51585-Irc
 CHDIO 1
 Filed 02/28/22
 Entersedunal/28/22 12:36:23
 Desc

 First Name
 Middle Name
 Petition
 Page 37 of 63

Afte	r listing any entries on this page, number then	n beginning with	h 4.4, followed by 4.5, and so forth.	Total claim
1.4	DEPT OF EDUCATION/NELN		Last 4 digits of account number 9963	s 2,224.00
	Nonpriority Creditor's Name		_	φ
	121 S 13TH ST		When was the debt incurred? $8/23/17$	
	Number Street		As of the date year file the plains is: Check all that apply	
	LINCOLN	68508	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one.	ZIP Code	Contingent Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☑ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	
	☑ No ☐ Yes			
4.5	DISCOVER FIN SVCS LLC		Last 4 digits of account number 4613	\$ 858.00
	Nonpriority Creditor's Name		When was the debt incurred? 4/16/17	
	PO BOX 15316		When was the debt incurred? 4/16/1/	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	WILMINGTON DE	19850		
	City State Who incurred the debt? Check one.	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 1 only		U Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	☐ At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that 	
			you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify CREDIT CARD	
	☑ No			
	Yes			
4.6	LO CVOTEM INO		Last 4 digits of account number 9452	\$ 935.00
	I.C. SYSTEM, INC Nonpriority Creditor's Name			
	PO BOX 64378		When was the debt incurred? $4/7/21$	
	Number Street SAINT PAUL MN	55164	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated☐ Disputed☐	
	Debtor 1 only		— 5,554.63	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? 년 No		Other. Specify COLLECTION	
	☐ Yes			

Debt

MARGARGE 22-51585-Irc CHROC 1 Filed 02/28/22 Entered_02/28/22 12:36:23

t 2:	Your NON	PRIORITY Uns	ecured Claims	Continua	tion Page	•		
	First Name	Middle Name	Last Name	Petition	Page	38 of 63		
or 1	man webs	3 22 01000					hiber (francium	<i>D</i> C C C C C C C C C C C C C C C C C C C

Afte	r listing any entries on this page, nu	mber ther	n beginning v	with 4.4, followed by 4.5, and so forth.	Total claim
4.7	MERRICK BANK CORP			Last 4 digits of account number 4186	_{\$} 1,845.00
	Nonpriority Creditor's Name PO BOX 9201			When was the debt incurred? 1/13/19	*
	Number Street	NY	11804	As of the date you file, the claim is: Check all that apply.	
	OLD BETHPAGE City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another	uitus alaba		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community the claim subject to offset?	mty debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CREDIT CARD	} {
	☑ No			Garet. Specify	
	Yes				
4.8	NET CREDIT			Last 4 digits of account number 2223	_{\$} 4,900.00
	Nonpriority Creditor's Name			When was the debt incurred? 12/29/20	
	175 W JACKSON BLVD STE 1 Number Street				
	CHICAGO	IL.	60604	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.			Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
1	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify COLLECTION	
	☑ No ☐ Yes				
4.9				Last 4 digits of account number 7263	\$ 6,892.00
	RESURGENT CAPITOL Nonpriority Creditor's Name			0/0/00	
	10497 GREENVILLE			When was the debt incurred? 9/3/20	
	Number Street GREENVILLE	SC	29605	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated Disputed	
	Debtor 1 only			,	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	_		Student loans	
	At least one of the debtors and another Check if this claim is for a commu			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	inty uebt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify COLLECTION	
	No Yes			Otner. Specify OCELECTION	

MARGARES 22-51585-Irc CHICAGO 1 Filed 02/28/22 Entered 02/28/22 12:36:23 Desc First Name Middle Name Last Name Petition Page 39 of 63

rt 2: Y	our NONPRIORITY	Unsecured	Claims -	Continuation	Page
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Afte	r listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.10	RIDGEVIEW INSTITUTE	Last 4 digits of account number 0161	s 4,599.00
	Nonpriority Creditor's Name	When was the debt incurred? 9/11/18	Ψί
	4140 SOUTH COBB DRIVE SOUTHEAST	When was the debt incurred? 9/11/18	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	SMYRNA GA 30080 City State ZiP Code	☐ Contingent	
	City State Zir Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	_ 5.000.00	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims	
	Is the claim subject to offset?	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify MEDICAL 	
	☑ No	Other, Specify MEDIO/ IL	
	Yes		
4.11		Last 4 digits of account number 1688	_{\$} 1,301.00
	SYNCB/PPC Nonpriority Creditor's Name	-	\$_1,001100
		When was the debt incurred? $4/29/20$	j !
	PO BOX 530975 Number Street	-	
	ORLANDO FL 32896	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
		☐ Disputed	ļ
	Debtor 1 only	Time of NONDRIODITY unacquired claims	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	is the claim subject to offset?	Other. Specify CREDIT CARD	
	☑ No		
	☐ Yes		
4.12			s 376.00
	SYNCB/PPMC	Last 4 digits of account number 0854	\$ 370.00
	Nonpriority Creditor's Name	-	
	PO BOX 981416	When was the debt incurred? $8/16/20$	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	EL PASO TX 79998		
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated☐ Disputed	
	☑ Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that 	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CREDIT CARD	
	☑ No	Y	
	Yes		
1			er sac

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art 2:	Your NONPRIORITY	Unsecured	Claims -	Continuation	Page
	I ONI ITOITI ILLOILLI	OHISCOMICA	CIGILII	Continuation	

Afte	r listing any entries on this page, n	umber the	n beginning with 4	4.4, followed by 4.5, and so forth.	Total claim
4.13	TITLEMAX			Last 4 digits of account number 0161	_{\$} 1,020.00
	Nonpriority Creditor's Name				\$ 7,020.00
	1873 COBB PARKWAY SOUTHEAST			When was the debt incurred? $\frac{7/8/20}{}$	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	MARIETTA	GA State	30060 ZIP Code	☐ Contingent	
	City	State	ZIF COde	Unliquidated	
	Who incurred the debt? Check one.			Disputed	
	Debtor 1 only			·	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another	r		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	ınity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify COLLECTION	
	☑ No				
	Yes				
4.14	USAA SAVINGS BANK	nya senganyangkan panganyan		Last 4 digits of account number 3551	_{\$} 2,195.00
	Nonpriority Creditor's Name				·
	PO BOX 47504			When was the debt incurred? $11/20/19$	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	SAN ANTONIO	TX	78265		
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only			- Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another	r		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	ınity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify CREDIT CARD	
	Ø No				
	☐ Yes				
4.15		an andrew to the angles and a		6505	_{\$} 5,153.00
	WALTON COMMUNITIES C/O THE EXCHANGE	E 		Last 4 digits of account number 6505	
	Nonpriority Creditor's Name THE EXCHANGE SOUTHEAST			When was the debt incurred? $8/1/21$	
	Number Street				
	ATLANTA	GA	30339	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
l l	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and anothe	r		Student loansObligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	inity debt		you did not report as priority claims	
ĺ	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	No			Other. Specify COLLECTION	
	☑ Yes				
}	169				

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them	ı beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.16	WEST COBB SMILES		Last 4 digits of account number 0161	s 175.00
	Nonpriority Creditor's Name		- 44/40/04	\$ <u>170.00</u>
	1133 EAST-WEST CONNECTOR		When was the debt incurred? 11/18/21	ļ
	Number Street		As of the date you file, the claim is: Check all that apply.	
	AUSTELL GA	30106		
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated☐ Disputed	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify MEDICAL	
	☑ No			
	☐ Yes			
			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent	
	Miles Secretarial than delete Observer		Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only		T. CHOLIDDIODITY	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	
	□ No		Cition opposity	
	Yes			
			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent	
			☐ Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only			
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	□ No		Unier. Specify	
	☐ Yes			
	— 103			

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	2,826.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$	37,810.00
	6j. Total. Add lines 6f through 6i.	6j.		40.636.00

Entered 02/28/22 12:36:23 Case 22-51585-lrc Doc 1 Filed 02/28/22 Fill in this information to identify your case: MARGARET CHICK Debtor First Name Middle Name Last Name Debtor 2 (Spouse If filing) First Name Middle Name NORTHERN DISTRICT OF GEORGIA United States Bankruptcy Court for the: Check if this is an (if known) amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. State what the contract or lease is for Person or company with whom you have the contract or lease 2.1 PUBLIC STORAGE LEASE (STORAGE): STORAGE 1780 SOUTH COBB DRIVE Number Street MARIETTA 30060 GΑ City ZIP Code State 2.2 Name Number Street City State ZIP Code 2.3 Name Numbe Street City State ZIP Code 2.4 Name

Number

City

Street

State

ZIP Code

		Case 22-515	85-lrc Doc 1	Filed 02/28/22	Entered 02/28/22 12:36:23	Desc
Fill in	ı this ir	nformation to identify	your case:		44 of 63	
Debto	nr 1	MARGARET		CHICK		
		First Name	Middle Name	Last Name	}	
Debto (Spous) First Name	Middle Name	Last Name	}	
United	d States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA		
Casa	number				}	
(If kno						Check if this is ar
						amended filing
Offic	cial I	Form 106H				
Sch	red	ule H: You	r Codebtor	' S		12/15
						
are filin	ng tog umber t	ether, both are equal	ly responsible for su ses on the left. Attach	pplying correct informat	ve. Be as complete and accurate as possik ion. If more space is needed, copy the Ad this page. On the top of any Additional Pa	ditional Page, fill it out,
1 _	o you h 1 No	nave any codebtors?	(If you are filing a join	t case, do not list either sp	ouse as a codebtor.)	
1	1 Yes					
{		ne last 8 vears, have	vou lived in a commu	inity property state or te	rritory? (Community property states and ten	ritories include
1					s, Washington, and Wisconsin.)	
1		Go to line 3.				
-		·	er spouse, or legal eq	uivalent live with you at th	e time?	
					-	· ·
	LI Y	es. In which communi	ty state or territory did	you live?	Fill in the name and current address	of that person.
	Ī	Name of your spouse, former	spouse, or legal equivalent			
	ī	Number Street				
	•					
		City	State	ZIP Cod	le	
sl S	hown i chedu	n line 2 again as a co	debtor only if that pe 6D), Schedule E/F (C	erson is a guarantor or c	odebtor if your spouse is filing with you. L osigner. Make sure you have listed the cre Schedule G (Official Form 106G). Use Sche	editor on
	Columr	1: Your codebtor			Column 2: The creditor to wh	nom you owe the debt
					Check all schedules that app	ly:
3.1					Schedule D, line	
	Name				Schedule E/F, line	
	Number	Street			Schedule G, line	
						
22	City	وروان والمجاورة والمحادثات فتواقيه والمساورين والمجاورة المجاورة والمجاورة والمجاورة والمجاورة والمجاورة والمجا	State	ZIP C	ode	
3.2	Nama				Schedule D, line	
{	Name				☐ Schedule E/F, line	
1	Number	r Street			Schedule G, line	
	City		State	ZIP C	ode	
3.3						
	Name				Schedule D, line	
1					☐ Schedule E/F, line	_

☐ Schedule G, line _____

Number

Street

Fill in this information to identify	your case:	tiori i atgio				
Debtor 1 MARGARET		CHICK				
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF GE	EORGIA	}			
Case number(If known)				Check if th		
					ended filing	4.0
					lement showing postpetition chapte as of the following date:	er 13
Official Form 106I				MM / D	D/ YYYY	
Schedule I: You	r Income				12/	15
supplying correct information. If yo	ou are married and not fili se is not filing with you, o top of any additional pag	ng jointly, and you do not include info	ur spouse is ormation ab	s living with y out your spou	or 2), both are equally responsible for ou, include information about your s use. If more space is needed, attach a nown). Answer every question.	pouse.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filling spouse	
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☑ Not employe	ed .		☐ Employed ☐ Not employed	
Include part-time, seasonal, or self-employed work.	Occupation					
Occupation may include student or homemaker, if it applies.	Occupation					
	Employer's name					
	Employer's address					
		Number Street			Number Street	
		City	State ZIF	Code	City State ZIP Code	
	How long employed the	•			Sily State and State	
	now long employed the					
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of	the date you file this form	n. If you have nothi	ng to report	for any line, wr	ite \$0 in the space. Include your non-fill	ng
spouse unless you are separated. If you or your non-filing spouse ha		er combine the info	rmation for a	all employers fo	or that nerson on the lines	
below. If you need more space, at				an omployers .	or that porosity on the initial	
			Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sale deductions). If not paid monthly,			2. \$	0.00	\$	
3. Estimate and list monthly over	rtime pay.		3. + \$	0.00	+ \$	
Calculate gross income. Add li			4. \ \\$_	0.00	\$	
					L	

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Case number (# known)

Debtor 1

MARGARET

First Name

For Debtor 1 For Debtor 2 or non-filing spouse 0.00Copy line 4 here..... 5. Indicate whether you have the payroll deductions below: 0.005a. 5a. Tax, Medicare, and Social Security deductions 0.005b. Mandatory contributions for retirement plans 5b. 5c. 5c. Voluntary contributions for retirement plans 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 5e. 5e. Insurance 5f. Domestic support obligations 5f. 5g. 5g. Union dues 0.005h. Other deductions. Specify: _ 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. 0.007. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 0.00 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.008b. Interest and dividends 0.008c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 0.008d. Unemployment compensation \$ 1.354.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps or housing subsidies. Specify (Debtor 1): Specify (Debtor 2 or Non-Filing Spouse): SSD, SNAP 89.00 0.00 8g. Pension or retirement income 8h. Other monthly income. Specify (Debtor 1): Specify (Debtor 2 or Non-Filing Spouse): 0.00 1,443.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. \$ 1 1.443.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives, Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. **+** 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1.443.00 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined 13. Do you expect an increase or decrease within the year after you file this form? monthly income No. Yes. Explain:

Fill in this	information to identify	your case:				
Debtor 1	MARGARET First Name	CHICK Middle Name Last Name	Check if t	this is:		
Debtor 2				nended fill	ina	
1 ' '	ng) First Name	Middle Name Last Name			-	petition chapter 13
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF GEORGIA	expen	ses as of	the following	date:
Case numb	er		MM / I	OD / YYYY		
Official	Form 106J	•				
		ur Expenses				12/15
information		ossible. If two married people are fili led, attach another sheet to this form				
Part 1:	Describe Your Ho	usehold		 		
1. Is this a j	oint case?					
	Go to line 2. Does Debtor 2 live in a	separate household?				
	No Yes. Debtor 2 must fi	ile Official Form 106J-2, Expenses for S	eparate Household of Debtor 2			
**********	ave dependents?	₩ No		·		
_	t Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	ate the dependents'					☐ No ☐ Yes
						□ No
						☐ Yes
						U No □ Yes
						☐ No
						☐ Yes
						☐ No ☐ Yes
						Yes
expenses	expenses include s of people other than and your dependents?	✓ No✓ Yes				
Part 2:	Estimato Your Ongo	ing Monthly Expenses				
-		ir bankruptcy filing date unless you a	ve using this form as a suppl	one and in a	Chapter 12 a	
	s of a date after the ba	nkruptcy is filed. If this is a supplement				
include exp	enses paid for with no	n-cash government assistance if you	know the value of			
such assist	ance and have include	ed it on Schedule I: Your Income (Offi	ciał Form 106I.)		Your expe	nses
	tal or home ownership for the ground or lot.	expenses for your residence. Include	first mortgage payments and	4.	\$	900.00
lf not in	cluded in line 4:					
4a. Re	al estate taxes			4a.	\$	
4b. Pro	pperty, homeowner's, or	renter's insurance		4b.	\$	0.00
4c. Ho	me maintenance, repair,	, and upkeep expenses	•	4c.	\$	0.00
4d. Ho	meowner's association of	or condominium dues		4d	\$	

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Debtor 1

MARGARET First Name

Middle Name

CHICK Last Name

Case number (# known)_

		Your exp	penses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	20.00
6b. Water, sewer, garbage collection	6b.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	70.00
6d. Other. Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$	170.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$	190.00
10. Personal care products and services	10.	\$	40.00
11. Medical and dental expenses	11.	\$	270.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$	150.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14. Charitable contributions and religious donations	14.	\$	0.00
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	0.00
15d. Other insurance. Specify:	15d.	\$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	
17b. Car payments for Vehicle 2	17b.	\$	
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19. Other payments you make to support others who do not live with you.			
Specify:	19.	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

Case 22-51585-lrc Doc 1 Filed 02/28/22 Entered 02/28/22 12:36:23 Petition Page 49 of 63 MARGARET CHICK Debtor 1 Case number (if known) First Name Last Name Middle Name Other. Specify: STORAGE, TIMESHARE EXPENSES, REPAYMENT STUDENT LOAN 100.00 Calculate your monthly expenses. 22. 2,110.00 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 0.00 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 2,110.00 23. Calculate your monthly net income. 1,443.00 Copy line 12 (your combined monthly income) from Schedule I. 23a. 2,110.00 23b. Copy your monthly expenses from line 22c above. 23b. 23c. Subtract your monthly expenses from your monthly income. -667.00 The result is your monthly net income. 23c.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

Ø	No.	
	Yes.	Explain here:

Case 22-51585-lrc Doc 1 Filed 02/28/22 Entered 02/28/22 12:36:23 Desc

Fill in this ir	nformation to identify	your case:		
Debtor 1	MARGARET First Name	Middle Name	CHICK Last Name	
Debtor 2 (Spouse, if filing		Middle Name	Last Name	
	Bankruptcy Court for the	NORTHERN DISTRICT	OF GEORGIA	
Case number (If known)	·			
		·		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C	
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	☐ Retain the property and enter into a Reaffirmation Agreement.		
·	Retain the property and [explain]:		
Creditor's name:	Surrender the property.	☐ No	
	Retain the property and redeem it.	☐ Yes	
Description of property securing debt;	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
socialing dobt.	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	☐ No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
sooding door.	Retain the property and [explain]:		

12/15

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Case number (If known)

Debtor 1

MARGARET First Name

CHICK Last Name

0-2	9

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: PUBLIC STORAGE	☑ No
Description of leased LEASE (STORAGE): STORAGE property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	☐ No ☐ Yes
Description of leased property:	
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	☐ No
Description of leased property:	☐ Yes
art 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any pro personal property that is subject to an unexpired lease.	perty of my estate that secures a debt and any
en Lachec *	
Signature of Debtor 2 Signature of Debtor 2	
Date Date Date	

Case 22-51585-lrc Doc 1 Filed 02/28/22 Entered 02/28/22 12:36:23 Desc Petition Page 52 of 63

Fill in this in	iformation to ide	ntify your case:		
Debtor 1	MARGARET		CHICK	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	the: NORTHERN DISTRIC	T OF GEORGIA	
Case number	(If known)			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,070.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,070.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 40,636.00
Your total liabilities	\$40,636.00
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,443.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	_{\$} 2,110.00

Case 22-51585-lrc Doc 1 Petition Page 53 of 63

MARGARET

CHICK

Debtor 1

Last Name

Case number (if known)

Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. ☑ Yes		
7.	What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an	individual primarily for a person	nal,
	family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.		d submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$ 89.00
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	and the second of the second o
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	\$0.00	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f.)	\$2,826.00	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	•
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00	
	9g. Total. Add lines 9a through 9f.	\$	

	Case 22-5	1585-lrc Doc :		1/22 Entered 02/28/22 12:36:23 age 54 of 63	Desc
Fill in this in	formation to ident	ify your case:	PEIIIUIIPa	UE 54 01 63	
Debtor 1	MARGARET		сніск		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for th	ne: NORTHERN DISTRIC	T OF GEORGIA		
Case number (If known)					
					Check if this is ar amended filing
					amenada ming
Officia	ıl Form 106i	Dec			
					
Deci	aration A	About an	Individua	l Debtor's Schedules	12/15
If two mar	ried people are filir	ng together, both are e	equally responsible for	or supplying correct information.	
		_		ended schedules. Making a false statement, cor	ncealing property, or
		-		case can result in fines up to \$250,000, or impr	
years, or l	ooth. 18 U.S.C. §§ 1	I52, 1341, 1519, and 35	571.		
	Sign Below				
	Sign Below				
		ay someone who is N	OT an attorney to he	lp you fill out bankruptcy forms?	
☑ No				Attack Poulseuntay Politics Proposed Nation D	coloration and
☐ Ye	s. Name of person			Attach Bankruptcy Petition Preparer's Notice, Do Signature (Official Form 119).	əciaration, and
				Signature (emotal) emiliant	
	penalty of perjury, ley are true and col		ead the summary and	d schedules filed with this declaration and	
	^				
0/	1000	/			
*//	land (h	rel	_		
Signat	ture of Debtor 1		Signature of	Debtor 2	÷

Date _____

	Case 22-51585-lrc		02/28/22 12	2:36:23 Desc	
Fill in thi	s information to identify your case: Petition Page !		Check one box or Form 122A-1Supp	nly as directed in this form	and in
Debtor 1	MARGARET CHICK First Name Middle Name Last Name				
Debtor 2 (Spouse, if file	ling) First Name Middle Name Last Neme			resumption of abuse. on to determine if a presump	ntion of
	tes Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA (State)		abuse applies	on to determine if a presump s will be made under <i>Chapte</i> Calculation (Official Form 12	er 7
Case numb (If known)	per			est does not apply now becaury service but it could apply	
		Į	Check if this is	s an amended filing	
Officia	l Form 122A-1				
Chap	ter 7 Statement of Your Current N	/lonthly	/ Income		04/20
dditional lo not hav	eeded, attach a separate sheet to this form. Include the line number pages, write your name and case number (if known). If you believe e primarily consumer debts or because of qualifying military service of 707(b)(2) (Official Form 122A-1Supp) with this form. Calculate Your Current Monthly Income	that you are	exempted from a	presumption of abuse bec	ause you
1. Wha	t is your marital and filing status? Check one only.			 	
	Not married. Fill out Column A, lines 2-11.				
	Married and your spouse is filing with you. Fill out both Columns A ar	nd B, lines 2-1	1.		
	Married and your spouse is NOT filing with you. You and your spou	ise are:			
1	Living in the same household and are not legally separated. Fil				
	Living separately or are legally separated. Fill out Column A, line under penalty of perjury that you and your spouse are legally separaspouse are living apart for reasons that do not include evading the living apart.	ated under no	nbankruptcy law th	at applies or that you and yo	
bani Augi Fill ii	in the average monthly income that you received from all sources, kruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on Sust 31. If the amount of your monthly income varied during the 6 months in the result. Do not include any income amount more than once. For exame from that property in one column only. If you have nothing to report for the column only.	eptember 15, t s, add the incor ample, if both s	the 6-month period me for all 6 months spouses own the sa	would be March 1 through and divide the total by 6. ame rental property, put the	
		1	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	r gross wages, salary, tips, bonuses, overtime, and commissions ore all payroll deductions).		\$ <u>0.00</u>	\$	
	nony and maintenance payments. Do not include payments from a spoum B is filled in.	ouse if	\$ <u>0.00</u>	\$	
of your from and	mounts from any source which are regularly paid for household ex ou or your dependents, including child support. Include regular cont an unmarried partner, members of your household, your dependents, p roommates. Include regular contributions from a spouse only if Column in. Do not include payments you listed on line 3.	tributions parents,	\$0.00	\$	
1	income from operating a business, profession, Debtor 1 Debt	tor 2			
or fa	arm ss receipts (before all deductions) \$\(_{0.00} \) \$				
Ordi	nary and necessary operating expenses - \$_0.00 - \$_				
Net	monthly income from a business, profession, or farm \$ 0.00 \$	Copy here	\$ <u>0.00</u>	\$	
Gros	ss receipts (before all deductions) \$ 0.00 \$_	tor 2 ———			
1	inary and necessary operating expenses - \$_0.00 - \$_	Copy_	• 0.00	¢	
ľ	monthly income from rental or other real property $$0.00 $$ rest, dividends, and royalties	here	\$ <u>0.00</u> \$ 0.00	Φ \$	
/ . Inte	100t, attraction, and regardes		Ψ <u> </u>	Ψ	

Debtor	1 MARGARET	-	СНІСК		Case number (if known)_		
	First Name	Middle Name	Last Name				
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8.	Unemployment	compensation			\$ 0.00	\$	
	under the Social	Security Act. Instead	d, list it here:	received was a benefit 	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	•	se					
	Pension or retine benefit under the not include any of United States Godisability, or dea pay paid under of does not exceed	rement income. Do not be social Security Act. compensation, pension overnment in connect the of a member of the chapter 61 of title 10,	not include any am Also, except as st on, pay, annuity, or tion with a disability e uniformed service then include that p d pay to which you	ount received that was a ated in the next sentence, do allowance paid by the y, combat-related injury or as. If you received any retired any only to the extent that it would otherwise be entitled if	\$ <u>0.00</u>	\$	
1	Do not include a under the Feder under the Nation coronavirus dise crime against hu pension, pay, ar with a disability, uniformed service	ny benefits received al law relating to the nal Emergencies Act ase 2019 (COVID-19 manity, or internation unity, or allowance prombat-related injury	under the Social S national emergenc (50 U.S.C. 1601 et 9); payments received nal or domestic terro to aid by the United S by or disability, or de	cify the source and amount. ecurity Act; payments made y declared by the President seq.) with respect to the yed as a victim of a war crime, rorism; or compensation, States Government in connect eath of a member of the a separate page and put the to	ion		
	SNAP				\$ 89.00	\$	
	011/11				\$	\$ \$	
	Total amounts	from separate pages	if any		+ \$	+ \$	
	column. Then ad	total current month dd the total for Colum nine Whether the	nn A to the total for		\$_89.00	+ \$0	Total current monthly income
							
12.	-	current monthly inc	-	•		Copy line 11 here	\$ 89.00
			-	11	••••••	Copy line 11 here	
	, -	y 12 (the number of r			e.	[x 12 \$ 1,068.00
	12b. The result	t is your annual incor	ne for this part of th	ne form.		12b.	\$_1,060.00
13.	. Calculate the m	nedian family incom	e that applies to	you. Follow these steps:			
	Fill in the state i	n which you live.		GA	,		
	Fill in the number	er of people in your h	ousehold.	1		_	
	To find a list of a	applicable median inc	come amounts, go	of householdonline using the link specified at the bankruptcy clerk's office	in the separate	13.	\$ 53,105.00
14.	. How do the line	es compare?					
	14a. 🔽 Line 12	•		e top of page 1, check box 1, m 122A-2.	There is no presump	otion of abuse.	
		2b is more than line 1 Part 3 and fill out For		ge 1, check box 2, The presu	mption of abuse is o	letermined by Form 1224	4-2.

ebtor 1	MARGARET First Name Middle Name	CHICK Last Name	Case number (if known)	
Part 3:	_	Last Name		
	By signing here, I decl	are under penalty of perjury that the	information on this statement and in any attachments is true and correct.	
ļ	Signature of Debtor	}	Signature of Debtor 2	
	Date <u>82 28 8 MM / DD / Y</u>	2020	Date	
	If you checked line	14a, do NOT fill out or file Form 122	'A-2.	
	If you checked line	14h fill out Form 122A-2 and file it	with this form	

IN THE UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF GEORGIA

IN RE:)					
MARGARET CHICK Debtor.) Case No) Chapter 7					
VERIFICATION OF MATRIX						
The above named debtor hereby verifies that the attached List of Creditors is true and correct to the best of his/her/their knowledge.						
Date: 22/28/2022	Debtor Signature					

AVANT
222 NORTH LASALLE STREET
CHICAGO, IL 60601

CAP1/WMT PO BOX 31293 SALT LAKE CITY, UT 84131

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN, NE 68508

DISCOVER FIN SVCS LLC PO BOX 15316 WILMINGTON, DE 19850

I.C. SYSTEM, INC PO BOX 64378 SAINT PAUL, MN 55164

MERRICK BANK CORP PO BOX 9201 OLD BETHPAGE, NY 11804 RESURGENT CAPITOL 10497 GREENVILLE GREENVILLE, SC 29605

RIDGEVIEW INSTITUTE 4140 SOUTH COBB DRIVE SOUTHEAST SMYRNA, GA 30080

SYNCB/PPC PO BOX 530975 ORLANDO, FL 32896

SYNCB/PPMC PO BOX 981416 EL PASO, TX 79998

TITLEMAX 1873 COBB PARKWAY SOUTHEAST MARIETTA, GA 30060 USAA SAVINGS BANK PO BOX 47504 SAN ANTONIO, TX 78265

WALTON COMMUNITIES C/O THE EXCHANGE
THE EXCHANGE SOUTHEAST
SUTE 120
ATLANTA, GA 30339

WEST COBB SMILES
1133 EAST-WEST CONNECTOR
STE 120
AUSTELL, GA 30106

U. S. BANKRUPTCY COURT / NORTHERN DISTRICT OF GEORGIA / ATLANTA DIVISION RECEIPT #01267023 (OJ) OF 02/28/2022

ITEM CODE CASE QUANTITY AMOUNT BY

1 7IN 22-51585 1 \$ 0.00 Currency

Judge - unknown at time of receipt

Debtor - MARGARET CHICK

TOTAL: \$ 0.00

FROM: Margaret Chick

2084 Cold Springs Trail SouthWest

Marietta, GA 30064

Case Number: 22-5158	5 Retition Page Name: Chick	63 of 63 Chapter: 7
Please submit the following original destanged copy of the documents, please	ocuments to the Court for filing so that e submit an extra copy along with a self	the case will proceed timely. If you would like to have a filed-f-addressed stamped envelope.
Individual - Series 100 Form		☐ Non-Individual - Series 200 Forms
MISSING DOCUMENTS DUE W		Petition Deficiencies:
☐ Complete List of Creditors (name		☐ Last 4 digits of SSN
☐ Pro Se Affidavit (due within 7 da		☐ Address ☐ County
or witnessed by a Court Intake Clerk	_	☐ Type of Debtor☐ Chapter
☐ Signed Statement of SSN (due wi	ttnin / days)	☐ Nature of Debts
MISSING DOCUMENTS DUE V	VITHIN 14 DAYS	☐ Statistical Estimates
☐ Statement of Financial Affairs	<u> </u>	☐ Venue
	I J J-2 (different address for Debtor 2)	☐ Attorney Bar Number
☐ Summary of Assets and Liability		I Money But Number
☐ Declaration About Debtor(s) Sci		Case filed vie
☐ Attorney Disclosure of Compen		<u>Case filed via</u> : ⊠ Intake Counter by:
☐ Petition Preparer's Notice, Decl		☐ Attorney
☐ Disclosure of Compensation of		☐ Attorney ☐ Debtor - verified ID
☐ Chapter 13 Current Monthly Inc		☐ Other - copy of ID: (678) 524-1227
☐ Chapter 7 Current Monthly Inco		□ Outer - copy of 1D. <u>⟨0/0/324 1227</u>
☐ Chapter 11 Current Monthly Inc	come	☐ Mailed by:
☐ Certificate of Credit Counseling	; (Individuals only)	☐ Attorney
☐ Pay Advices (Individuals only)	(2 Months)	☐ Debtor
☐ Chapter 13 Plan, complete with	signatures (local form)	☐ Other:
☐ Corporate Resolution (Business	Ch. 7 & 11)	
		☐ Email [Pursuant to General Order 45-2021, this
Ch.11 Business		petition was received for filing via email]
☐ 20 Largest Unsecured Creditors		
☐ List of Equity Security Holders		History of Case Association
☐ Small Business - Balance Sheet		Prior cases within 2 years: None.
☐ Small Business - Statement of C	-	\mathcal{M} \mathcal{M} \mathcal{M}
☐ Small Business - Cash Flow Sta		Signature: //2/ /www
☐ Small Business - Federal Tax R	eturns	Acknowledgment of receipt of Deficiency Notice
MISSING DOCUMENTS DUE	WITHIN 30 DAYS	
☐ Statement of Intent – Ch. 7 (Inc.		
Official and Local Bankrupt	cy Forms are available on the Court's w	vebsite at: www.ganb.uscourts.gov. If filing bankruptcy without
attorney, please read the information	regarding Filing Bankruptcy without ar	a Attorney at: www.uscourts.gov/services-forms/bankruptcy/filin
without-attorney.		
THE THE THE OPERATION OF	al in al filia - for any material in t	full at the time of acco filing on Order will be forthcoming:
Online Payment for Filing Fee http	the required filing fees are not paid in sections:	full at the time of case filing, an Order will be forthcoming: ments (not for chapter 13 plan payments)
		ting 10-day (initial payment of \$ due within 10 days)
	-	_
<u></u>	-	ys IFP filed (Ch.7 Individuals Only)
	<u>in Installments, Order Regarding Unpai</u>	· · · · · · · · · · · · · · · · · · ·
You may mail documer	nts and filing fee payments (no personal checks:	accepted - cashier's check or money orders only) to the address below. st show the debtor's name and bankruptcy case number.
All lee pay	Failure to Comply may result in the	ne dismissal of your case.**
-	UNITED STATES BANKE	RUPTCY COURT
	75 Ted Turner Drive, SV	
	Atlanta, Georgia 404-215-10	
Intake Clerk: Dat	e: 2/28/22	er: Date: